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Express Mail Mailing Label No. EV 689990906 US

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## TRANSMITTAL FORM

Application Serial Number	10/084,403
Filing Date	February 25, 2002
First Named Inventor	Salmonsen
Group Art Unit	2123
Examiner Name	Guill
Attorney Docket No.	PXL-047
Patent No.	Not applicable
Issue Date	Not applicable

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input checked="" type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets 12]</li> </ul>	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	
<input type="checkbox"/> Petition for Extension of Time		
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Form PTO-1449</li> <li><input checked="" type="checkbox"/> Copies of IDS Citations (B1-B3, C1-C14)</li> </ul>		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

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